



**Indiana  
Professional  
Licensing  
Agency**

**Medical Licensing Board of Indiana**  
402 West Washington Street, Room W072  
Indianapolis, Indiana 46204  
Phone: (317) 234-2060  
Website: PLA.IN.gov

Michael R. Pence, Governor

Nicholas W. Rhoad, Executive Director

## Medical Controlled Substance Registration Expired Renewal Form

Your Controlled Substance Registration (CSR) is expired. You may renew your license online at [www.pla.in.gov](http://www.pla.in.gov). To renew by mail, please complete this form in its entirety and submit it with the expired renewal fee of \$110 to the office address shown in the above right corner. Make check or money order payable to 'Indiana Professional Licensing Agency'. Allow at least 4 weeks for the processing of this paper document. If you answer 'Yes' to any question below send a detailed statement regarding the response with your renewal form.

LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address			
Enter Licensee Name	Enter License Number	Enter Expiration Date	Renewal Fee \$110.00
Street Address			
City	State	Zip Code	
Phone Number	Email Address		

QUESTIONS	
1. Since you last renewed, have you ever been arrested or convicted for a crime that has not been expunged by an Indiana court?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Since you last renewed have you ever had any action, discipline or revocation on your DEA (U.S. Drug Enforcement Administration) registration or entered into a Memorandum of Understanding (MOU) on said registration?	Yes <input type="checkbox"/> No <input type="checkbox"/>

LICENSEE AFFIRMATION	
By signing below, I hereby attest that the information listed on this renewal application is true, complete and correct.	
Signature of Licensee	Date (month, day, year)

Visit us on the web at [www.pla.in.gov](http://www.pla.in.gov) for additional information regarding your licensure or email the Board at [pla3@pla.in.gov](mailto:pla3@pla.in.gov).

FOR OFFICE USE ONLY		
Renewal Fee	Receipt No.	Date